J6022. 1 50010 0 1 MAY 2007

Form PTO-1390 U.S. DEPARTMENT OF COMMERCE PATENT AND TRAVEMARK OFFICE		ATTORNEY'S DOCKET NUMBER					
TRANSMITTAL LETTER TO THE UNITED STATES		1327.0590001/JAG/HCC					
DESIGNATED/ELECTED OFFICE (DO/EO/US)		U.S. APPLICATION NO. (IF KNOWN, SEE 37 C.F.R. § 1.5)					
CONCERNING A FILING UNDER 35 U.S.C. 371		09/979,620					
INTERNATIONAL APPLICATION NO	INTERNATIONAL FILING DATE	PRIORITY DATE CLAIMED					
PCT/US00/14111	PCT/US00/14111 24 May 2000 24 May 1999						
Methods of Reducing Factor VIII Clearance and Compositions Therefor							
APPLICANT(S) FOR DO/EO/US							
	Evgueni L. SAENKO, and Dudley K. ST	RICKLAND					
Applicant herewith submits to the United S	Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:						
	ems concerning a filing under 35 U.S.C. 37						
	UENT submission of items concerning a fil						
<u> </u>	n national examination procedures (35 U.S						
4. The US has been elected by the	ne expiration of 19 months from the pri	ority date (PCT Article 31).					
5. A copy of the International Appli	ication as filed (35 U.S.C. 371(c)(2))						
a. is attached hereto (requ	tired only if not communicated by the Inter-	national Bureau).					
b. has been communicated	d by the International Bureau.						
c. is not required, as the a	application was filed in the United States Re	eceiving Office (RO/US).					
6. An English language translation	of the International Application as filed (35	5 U.S.C. 371(c)(2)).					
\mathfrak{g}_{\cdot} \square Amendments to the claims of the	International application under PCT Artic	le 19 (35 U.S.C. 371(c)(3))					
1)	quired only if not communicated by the Inte						
Ψ ⁻	ted by the International Bureau.						
li .	owever, the time limit for making such ame	endments has NOT expired.					
d. 🛛 have not been made an							
11	of the amendments to the claims under PC	T Article 19 (35 U.S.C. 372(c)(3)).					
9. An oath or declaration of the inv							
10. An English language translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)).							
Items 11. to 16. below concern other doc							
11. An Information Disclosure Statement under 37 C.F.R. 1.97 and 1.98.							
12. An assignment document for recording. A separate cover sheet in compliance with 37 C.F.R. 3.28 and 3.31 is included.							
13. A FIRST preliminary amendment	nt.						
A SECOND or SUBSEQUENT preliminary amendment.							
14. A substitute specification.							
15. A change of power of attorney and/or address letter.							
16. Other items or information:							

S APPLICATION NO (if known, s	ee 37 C F R 150)	INTERNATIONAL APPLICATION NO PCT/US00/14111			ATTORNIAN DECKET SCHIBER 1327.0590001/JAG/HCC		
17. X The followin	g fees are submitted:			T	CALCULATIONS	PTO USE ONLY	
Basic National Fe Neither internation nor international sec and International Prelin USPTO but Internat International prelin international search International prelin but all claims did n	e (37 CFR 1.492(a)(1)-(al preliminary examination fee (37 CFR 1.445(arch Report not prepared in the present of	on fee (37 CFR 1.482) a)(2)) paid to USPTO d by the EPO or JPO	SPTO but	00.00 60.00 710.00 590.00			
International prefir and all claims satisf	ied provisions of PCT A			l l	\$0		
	ENTER	APPROPRIATE BASIC	FEE AMOUNT	-	\$U		
Surcharge of \$130.00 from the earliest claim	for furnishing the oat ed priority date (37 C	h or declaration later than CFR 1.492(e)).	n □ 20 □ 30 months	ıs			
Claims	Number Filed	Number Extra	Rate				
Total Claims	- 20	=	X \$18.00	\$0			
Independent Claims	- 3	=	X \$80.00	\$0			
				\$0			
TOTAL OF ABOVE CALCULATIONS = \$0				\$0			
Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are			\$0				
reduced by 1/2. SUBTOTAL = \$0			\$0				
Processing fee of \$130.00 for furnishing the English translation later than 20 30 months from the earliest claimed priority date (37 CFR 1.492(f)).			\$0				
TOTAL NATIONAL FEE = \$0			\$0				
			\$40.0	0			
			\$40.0	00			
					Amount to be refunded:	\$	
					charged:	\$	
b. Please charge sheet is enclos c. The Comminaccount No	my Deposit Account led. ssioner is hereby auth 19-0036. A duplica	orized to charge any addi	mount of \$ to itional fees which may be inclosed. or 1.495 has not been met	required,	or credit any overpa	ayment to Deposit	
send all correspon		application to pending		160	limitale	e,c	
STERNE, KESSLER, GOLDSTEIN & FOX P.L.L.C.				SIGNATURE			
1100 New York Avenue, NW, Suite 600			Helen NAME	e C. Carlson			
Washington, D.C. 20005-3934				47,47			
Form PTO 1300 (PEV 1	2-29-99) page 2 of 2	SKGF Rev. 10	0/2/00 mac		::ODMA\N	HODMA\SKGF_DC1:9654	

U.S. Department of Commerce Form PTO-1595 RECORDATION FORM COVER SHEET Patent and Trademark Office (Rev. 03/01) PATENTS ONLY OMB No. 0651-0027 (exp. 5/31/2002) To the Honorable Commissioner of Patents and Trademarks. Please record the attached original documents or copy thereof. 2. Name and address of receiving party(ies): 1. Name of conveying party(ies): The American National Red Cross 1) Evgueni L. SAENKO Name: 2) Dudley K. STRICKLAND Internal Address: Street Address: 8111 Gatehouse Road Additional name(s) of conveying party(ies) attached? □ yes □ no 3. Nature of Conveyance: City: Falls Church State: Virginia Zip Code: 22042 □ Merger Assignment
 Assignment
 ■ Country: U.S.A. □ Change of Name □ Security Agreement □ Other _ Additional name(s) & address(es) attached? □ yes ⋈ no Execution Date: 1) 4/2/2002 and 2) 4/8/2002 4. Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the application is B. Patent No(s). A. Patent Application No. 09/979,620 Additional numbers attached? □ yes ⊠ no 6. Total number of applications and patents involved: 1 5. Name and address of party to whom correspondence concerning document should be mailed: 7. Total fee (37 C.F.R. § 3.41)......\$ 40.00 Name: Sterne, Kessler, Goldstein & Fox P.L.L.C. Internal Address: c/o Helene C. Carlson ☑ Enclosed ☐ Authorized to be charged to Deposit Account 8. Deposit Account Number: 1100 New York Ave., N.W. Street Address: Suite 600 19-0036 City: Washington State: D.C. Zip Code: 20005-3934 (Attach duplicate copy of this page if paying by deposit account) DO NOT USE THIS SPACE 9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Helene C. Carlson Name of Person Signing Registration No. 47,473 Total number of pages including cover sheet, attachments and document 3

Mail documents to be recorded with required cover sheet information to:

Commissioner of Patents and Trademarks, Box Assignments

Washington, D.C. 20231

PTO/SB/17 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$) 40.00

Complete if Known				
Application Number	09/979,620			
Filing Date	November 26, 2001			
First Named Inventor	Evgueni L. SAENKO			
Examiner Name	To be Assigned			
Group Art Unit	To be Assigned			
Attorney Docket No.	1327.0590001/JAG/HCC			

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)						
		TIONAL			-		
1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:	Large	Entity	Small	Entity			
Deposit Account Number 19-0036	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee D	escription	Fee paid
Deposit Account Name Sterne, Kessler, Goldstein & Fox P.L.L.C.	105	130	205	65	Surcharge - late filing fe	ee or oath	
□	127	50	227	25	Surcharge - late provisional	filing fee or cover sheet	
Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17	139	130	139	130	Non-English specific	ation	
Applicant claims small entity status See 37 CFR 1.27		2,520	147	2,520	For filing a request for	r <i>ex parte</i> reexamin	ation
See 37 CIRCII27	112	920*	112	920*	Requesting publication of action	f SIR prior to Examine	ar .
2. ⊠ Payment Enclosed:		1,840*	113	1,840*	Requesting publication of	f SIR after Examiner a	action
Check Credit card Money Order Other* Charge any deliciencies or credit any overpayments in the fees or fee calculations of Parts 1, 2 and 3 below to Deposit Account No. 19-0036.	115	110	215	55	Extension for reply wi	thin first month	
FEE CALCULATION	116	400	216	200	Extension for reply wi	thin second month	
1. BASIC FILING FEE	117	920	217	460	Extension for reply wi	thin third month	
Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid	118	1,440	218	720	Extension for reply wi	thin fourth month	
Code (\$) Code (\$)	128	1,960	228	980	Extension for reply wi	thin fifth month	
101 740 201 370 Utility filing fee	119	320	219	160	Notice of Appeal		
106 330 206 165 Design filing fee	120	320	220	160	Filing a brief in support of an appeal		
107 510 207 255 Plant filing fee	— 121	280	221	140	Request for oral hear	ing	
108 740 208 370 Reissue filing fee	138	1,510	138	1,510	Petition to institute a	oublic use proceedi	ing
114 160 214 80 Provisional filing fee	140	110	240	55	Petition to revive - un		
SUBTOTAL (1) (\$) <u>0</u>	141	1,280	241	640	Petition to revive - un		
55575775 <u>(1)</u>	142	1,280	242		Utility issue fee (or re	issue)	
	143	460	243	230	Design issue fee		
	144	620	244	310	Plant issue fee		
	122	130	122	130	Petitions to the Comr	nissioner	
EXTRA CLAIM FEES Fee from Extra below Fee Paid	123	130	123	130	Petitions related to pr	ns	
Total Claims 20** = X =	126	180	126	180	Submission of Inform	ation Disclosure St	mt
Indep. Claims 3** = X =		40	481	40	D Recording each patent assignment per property (times number of properties)		40.00
Multiple Dependent =	146	740	246	370	0 Filing a submission after final rejection (37 CFR 1.129(a))		
Large Entity Small Entity Fee Fee Fee Fee Fee Fee Description	149	740	249	370	For each additional in (37 CFR 1.129(b))	vention to be exam	nined
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	179	740	279	370	Request for Continue	d Examination (RC	E)
102 84 202 42 Independent claims in excess of 3	169	900	169	900	Request for expedited examination of a		-
104 280 204 140 Multiple dependent claim	0454	/: f . \ .			design application		
108 84 209 42 **Reissue independent claims over origin patent 110 18 210 9 **Reissue claims in excess of 20 and ove		(specity):					
original patent	Other fee (specify):						
SUBTOTAL (2) (\$) 0 *Reduced by B				Paid	CHRICTAL	(3) (\$) 40 00	<u> </u>
" or number previously paid, if greater; For Reissues, see above				_	SUBTOTAL		
SUBMITTED BY			. ,		T	Complete (if app	l ·
Name (Print/Type) Helene C. Carlson	· ·	Registration No. (Attorney/Agent) 47,473		47,473	Telephone	202-371-2600	
Signature Utility (Actor)	11					Date	May 1, 2002

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Burden Hour Statement: This form is estimated to take 0.2 hours to complete this form will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. #6019v1<SKGF_DC1> -Fee Transmittal for Assignment Rec.wpd